

11-27-00

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 85-R-0002

FORM APPROVED
OMB NO. 0579-0036

CUSTOMER NUMBER: 1071

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

University Of New Mexico-Maincampus
Scholes Hall, Room 227-A

Telephone:
(505)277-6128

Albuquerque, NM 87131

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters	79	144			144
8. Rabbits					
9. Non-human Primate		5			5
0. Sheep					
1. Pigs					
2. Other Farm Animals					
Wild Rodents	400	146	90		236
3. Other Animals					

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and follow actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

Dr. Nasir Ahmed - Associate Provost for

11/6/00

Annual Report Site Listing:

Customer ID and Site Address:

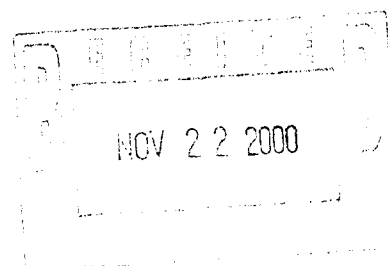
Cust ID: 1071

Dept. Of Biology,
Castetter Hall
Albuquerque, NM 87131
County: Bernalillo

Telephone
(505)277-6128

Department of Psychology (505)277-4121
Logan Hall
Albuquerque, NM 87131

Sevilleta Research Site
Sevilleta National Wildlife Refuge
Socorro, NM



11-27-00

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 85-R-0003
CUSTOMER NUMBER: 1072

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Lovelace Respiratory Research Institute
P. O. Box 5890

Telephone:
(505)844-6507

Albuquerque, NM 87185

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

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A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs	42	89	191	0	280
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	59	0	59
8. Rabbits	0	0	15	0	15
9. Non-human Primate	20	5	12	0	17
0. Sheep	0	0	0	0	0
1. Pigs	0	0	0	0	0
2. Other Farm Animals	-	-	-	-	-
Goats	18	0	0	0	0
3. Other Animals	-	-	-	-	-

ASSURANCE STATEMENTS

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(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

Robert W. Rubin

Robert W. Rubin, PhD CEO/President

11/16/00

Annual Report Site Listing:

Customer ID and Site Address:

Cust ID: 1072

Inhalation Toxicology
Laboratory

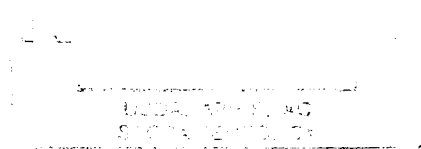
Area Y, Kirtland Afb Ea

Albuquerque, NM 87115

County: Bernalillo

Telephone

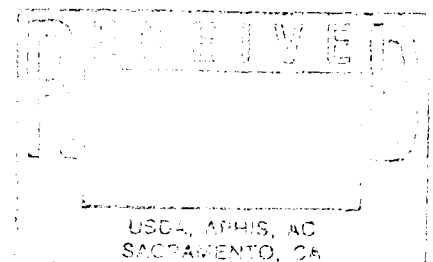
(505)845-1018



Block # 3 Reporting Facility

All animals are housed or used in actual research, testing, or experimentation, or held for these purposes at:

Inhalation Toxicology Laboratory
Area Y, Kirtland AFB East
Albuquerque, NM 87115



UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE1. CERTIFICATE NUMBER: 85-R-0009
CUSTOMER NUMBER: 1073FORM APPROVED
OMB NO. 0579-0036ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)Animal Care Facility
New Mexico State University
P. O. Box 30001 Box 3resTelephone:
(505)646-3241

Las Cruces, NM 88003

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

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4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primate	0	0	0	0	0
0. Sheep	0	0	0	0	0
1. Pigs	0	0	0	0	0
2. Other Farm Animals	0	0	0	0	0
	0	0	0	0	0
3. Other Animals	0	0	0	0	0

ASSURANCE STATEMENTS

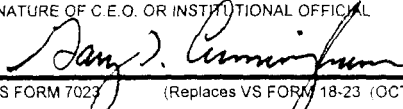
- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED



Gary L. Cunningham V.P. Research

10/11/00

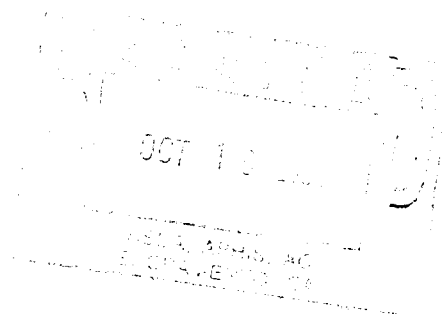
Annual Report Site Listing:

Customer ID and Site Address:

Cust ID: 1073

Animal Care Facility
Dept. 3acf Corner Of
Well & Research
Las Cruces, NM 88003
County: Dona Ana

Telephone
(505)646-3241



UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 85-R-0011
CUSTOMER NUMBER: 1075

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Coulston Foundation
1300 Lavelle Road

Telephone:
(505)434-1725

Alamogordo, NM 88310

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primate	746	58	97	0	155
0. Sheep	0	0	0	0	0
1. Pigs	0	0	0	0	0
2. Other Farm Animals	0	0	0	0	0
3. Other Animals					

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

Ronald C. Couch 11/22/00

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

Dr. Ronald C. Couch, Institutional Official 11/22/00

Annual Report Site Listing:

Customer ID and Site Address:

Cust ID: 1075

1300 Lavelle Road
Alamogordo, NM 88330
County: Otero

Telephone
(505)434-1725

Also reporting for

Coulston Foundation
Building 1264
Holloman AFB, NM 88330

(505) 443-7220

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 85-R-0014

CUSTOMER NUMBER: 1076

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

University Of New Mexico
Health Science Center

Telephone:
(505)272-3936

Albuquerque, NM 87131

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs		0	0	0	0
5. Cats		0	0	0	0
6. Guinea Pigs		0	0	0	0
7. Hamsters		0	0	0	0
8. Rabbits		14	0	0	14
9. Non-human Primate		0	0	0	0
0. Sheep		0	0	0	0
1. Pigs		1	35	0	36
2. Other Farm Animals		0	12	0	12
GOAT		0	12	0	12
DUCK		241	0	0	241
3. Other Animals					
FERRET		0	2	0	2
GERBIL		80	0	0	80

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)
R. Philip Eaton, M.D., Interim Vice
President, Health Sciences Center

DATE SIGNED

Annual Report Site Listing:

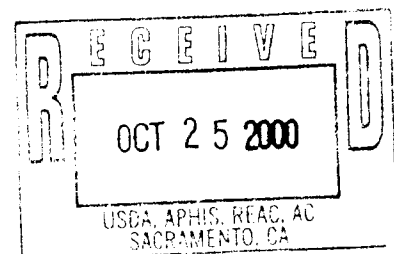
Customer ID and Site Address:

Cust ID: 1076

College Of Pharmacy
Nursing/Pharmacy
Building

Telephone
(505)272-3936

Albuquerque, NM 87131
County: Bernalillo



UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 85-R-0015
CUSTOMER NUMBER: 1077

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Southwest Bio-Labs, Inc.
401 N. 17th St., #11

Telephone:
(505)524-8917

Las Cruces, NM 88005

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
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5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primate	0	0	0	0	0
0. Sheep	0	0	0	0	0
1. Pigs	0	0	0	0	0
2. Other Farm Animals	0	0	0	0	0
3. Other Animals	0	0	0	0	0

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

Annual Report Site Listing:

Customer ID and Site Address:

Cust ID: 1077

Fort Fillmore Rd
Mesilla, NM 88047
County: Dona Ana

Telephone
(505)522-4303

9-27-00

This report is required by law (7 USC 2143). Failure to report according to the regulations can

See attached form for additional information

Interagency Report Control No.:

<p>UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE</p> <p>ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)</p>	<p>1. CERTIFICATE NUMBER: 85-R-0019 CUSTOMER NUMBER: 1337</p>	<p>FORM APPROVED OMB NO. 0579-0036</p>
<p>Raised By Wolves, Inc. Box 3127 HC 62 Box 3127 Thoreau, NM 87323</p> <p>Telephone: (505)862-7547</p>		

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

SAME as Above

FACILITY LOCATIONS (Sites) - See Attached Listing

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4. Dogs		20			20
5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primate					
0. Sheep					
1. Pigs					
2. Other Farm Animals					
3. Other Animals					

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

Renee Seelbach

Renee Seelbach President

9/19/00

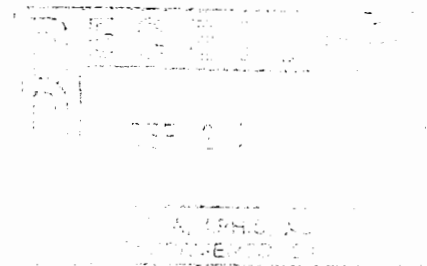
Annual Report Site Listing:

Customer ID and Site Address:

Cust ID: 1337

44 Johnson Drive
Thoreau, NM 87323
County: McKinley

Telephone
(505)838-0260



UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 85-R-0020
CUSTOMER NUMBER: 11111

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

E.Bgabrielle Dietrich → E.B. Gabrielle Dietrich
4108 Ponderosa Ne

Telephone:
(505)873-6613 ext. 224

Albuquerque, NM 87110

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primate					
0. Sheep					
1. Pigs					
2. Other Farm Animals					
3. Other Animals					
Rock Squirrels			16		16

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

Annual Report Site Listing:

Customer ID and Site Address:

Cust ID: 11111

Montessa Lab/3600 LoS
Picaños Rd. Se
Albuquerque, NM 87105
County: Bernalillo

Telephone
(505)873-6613 ext. 224